Supplementary File 2: Table to show how ideas were reduced from 23 to 10 and rationale for decisions

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| Idea | Reasons for Exclusion or Inclusion |
| Idea 1: Little Red Book | * Evidence of failure of patient held records in past mental health research
* Not secure, safeguarding etc.
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| Idea 2: Crisis and Respite Admissions | Include in final 10  |
| Idea 3: Nurse-led Discharges  | Include in final 10 |
| Idea 4: Discharge Teams | Include in final 10 |
| Idea 5: Patient Writes Discharge Plan  | Include in final 10 |
| Idea 6: Mental Health Co-ordinator in each GP practice  | * Not relevant to acute discharge period specifically
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| Idea 7: Building Professional Relationships  | Include in final 10 |
| Idea 8: Starting Discharge Planning from Admission | PRINCIPLE: This is an over-riding principle as opposed to an intervention |
| Idea 9: Multi-Agency Risk Management Plan  | Include in final 10 |
| Idea 10: Risk sharing between housing and hospital services | Include in final 10 |
| Idea 11: Multi-agency Meetings | Include in final 10 (combined with 19 into more inclusive multi-agency meetings using technology) |
| Idea 12: Patient Contracts  | * Doesn’t sit well with many participants
* Coercion and patient blame
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| Idea 13: Management Practice Weeks  | * Converted into idea 24- interagency buddying and shadowing meetings
* Removing the managerial element participants were keen to see the pressures other teams face
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| Idea 14: Personality Disorder or Cluster 7 and 8 Pathway | * Removed as the scope is too large and it is being done elsewhere on a nationwide level
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| Idea 15: Stepdown Service from Community Mental Health  | * Removed as the scope is too large and it is being done elsewhere on a nationwide level
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| Idea 16: Purposeful Admission  | PRINCIPLE: this is an overarching principle of effective transitions, rather than an intervention |
| Idea 17: Admission Avoidance Care Plan  | * Agreed that admission might not need to be avoided and sometimes it’s a good thing
 |
| Idea 18: Zero Tolerance Re-definition | Not relevant to acute discharge period specifically |
| Idea 19: Redefining MDT Meetings | * Combined with 11
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| Idea 20: Community Services Discharge Co-ordinator | * Combined with idea 4, discharge co-ordinating team can span whole care pathway
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| Idea 21: Personal Life Coach  | * Too large scope
* Too vague
* Not specifically relevant to discharge
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| Idea 22: Recovery College | * Removed as the scope is too large and it is being done elsewhere on a nationwide level
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| Idea 23: Self-referral to the Crisis Team  | Removed as the scope is too large and it is being done elsewhere on a nationwide level |
| Idea 24: Better Understanding of other agencies through buddying and shadowing | Include in final 10 |